



City of Burlington

Water Utility - 300 N. Pine Street, P. O. Box 477
Burlington, Wisconsin 53105-0477
Water Utility Phone: 262-342-1173

WATER & SEWER DIRECT PAYMENT PLAN

We are pleased to offer you a new service – the Direct Payment Plan. Now you can have your water/sewer payment made automatically from your checking or savings account.

The Direct Payment Plan will help you in several ways:

- it saves time and money – fewer checks to write, saves on postage costs
- payment is always on time, even if you are on vacation or out of town, which helps maintain good credit
- easy to sign up for, easy to cancel and no penalty charges for late payments

Here's how the Direct Payment Plan works: You authorize regularly scheduled payments to be made from your checking or savings

account quarterly. You will continue to be sent your quarterly water/sewer bill (at least 20 days before the payment is due). Your payment will be made automatically from your checking or savings account on the due date of your bill. Proof of payment will appear on your bank statement. The authority you give to charge your account will remain in effect until you notify us in writing to terminate the authorization.

The Direct Payment Plan is dependable, convenient and easy. To take advantage of this service, complete the authorization form below and return it to the **Burlington Water Utility, P.O. Box 477, Burlington, WI 53105-0477**. Please complete a separate form for each account. If you have any questions, please call 342-1173.

AUTHORIZATION FOR DIRECT PAYMENT

I authorize the City of Burlington Water Utility and the financial institution named below to deduct the amount of my quarterly water/sewer utility bill from my checking/savings account. This authority will remain in effect until I notify the Burlington Water Utility in writing to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it. I will also notify them if I wish to change banks, at which time I will complete another authorization form. **I understand that if I move and a final bill is requested on the account listed below, the amount of the final bill will not be automatically deducted from my bank account.**

SERVICE ADDRESS _____

ACCOUNT NO. _____ **EFFECTIVE DATE** _____

CUSTOMER INFORMATION:

NAME _____

BILLING/MAILING ADDRESS _____

CITY/STATE/ZIP _____

DAYTIME PHONE NUMBER _____

I am the **owner / renter** of the above service address. (Please circle one)

SIGNATURE _____ **DATE** _____

BANK INFORMATION:

NAME OF BANK _____

ROUTING NUMBER _____

ACCOUNT NUMBER _____

CHECKING ☐ **SAVINGS** ☐

*****PLEASE SUBMIT VOIDED CHECK WITH AUTHORIZATION FORM*****

FOR OFFICE USE ONLY:

Date Received: _____

Prenotification done: _____

Other: _____

**** For Direct Payment to be effective for the quarterly water/sewer bill, we must receive this form two weeks prior to bill due date. ****